PECT AVAILABLE COPY													
	DATEM		Application or Docket Number										
	PATENT	RD	109/728/52										
	CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
TOTAL CLAIMS			(Columi	n 1)	(Column 2)		TYPE			OR			
							RAT	RATE FEE		6	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE 3	55.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			70 minus 20=		• 20		X\$ 9	=		OR	X\$18=	300	
INDEPENDENT CLAIMS			5 minus 3 =		2		X40=		OR	X80=	160		
M	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					-				100	
* If the difference in column is less than zero, enter "0" in column						column 2	+135	—}_		OR		Ø	
andt. gill 6/17/55 CLAIMS AS AMENDED - PART II							TOTA	\ <u></u>		OR	TOTAL	1230	
	(Column 1) (Column 2) (Column 3)							L EN	TITY	OR	OTHER SMALL	H	
AMENDMENT A	4 97 4	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATI	TI	DDI- ONAL FEE		RATE	ADDI- TIONAL	
	Total ,	. 40	Minus	4	D	= /	X\$ 9	_	1	25	X\$18=	FEE_	
	Independent	. 5	Minus	*** 5		=/	X40:		+	OR		-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						A40		+-	OR	X80=	/	
									\perp	OR	+270=		
							TOT ADDIT, F			OR	TOTAL ADDIT, FEE		
		(Column 1) CLAIMS	Karas (Zav	(Colum		(Column 3)			(, ,			
NDMENT B		REMAINING AFTER AMENDMENT	<u> </u>	PREVIO PAID	USLY	PRESENT EXTRA	RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=	X\$ 9:	-		OR	X\$18=		
AME	Independent	NTATION OF MU	Minus	***		=	X40=			OR	X80=		
	THOT THESE	MINIONOFINE	LIPLE DE	ENDEN	CLAIM		1125	_					
							+135:			OR	+270=		
And A								E		OR ,	ADDIT. FEE		
ပ		CLAIMS REMAINING		HIGH	ST	(Column 3)				æ			
AMENDMENT	***	AFTER AMENDMENT	\$.	PREVIO PAID F	USLY	PRESENT EXTRA	RATE	TIC	DDI- NAL EE	***************************************	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9=			OR	X\$18=		
A	Independent FIRST PRESE	NTATION OF MU	Minus	ENDENT	CLAIM	=	X40=			OR	X80=		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-875

(Rev. 8/00)

OR

+270=

OR ADDIT. FEE

+135=